

Pediatric Use of Medical Marijuana

Connecticut – RE Bill HB6862

Honorable Representatives, Senators, Connecticut citizens, thank you for your time and thank you to our legislators for bringing the topic of pediatric use of medical marijuana to this floor. My name is Susan Wendy Meehan, mother to Cyndimae, Catrina, Corrine and Cassandra. A Mohegan Indian, I grew up in Meriden, Connecticut, and I own a home with my husband in Montville, Connecticut. Today, I come to plead for expeditious modifications to Connecticut medical marijuana laws to ensure the health and safety of my 12 year old daughter. We are currently medical marijuana refugees from Connecticut in the state of Maine. Cyndimae has a very difficult to control type of epilepsy called Dravet Syndrome, and she is thriving using medical marijuana to control nearly all of her seizures. I desperately miss the support systems of our Connecticut home. I do not need a study to know I want to come home.

Every day, Cyndimae begs me to go to HER school, to see her daddy and her sisters, her Aunties and her cousins. Remarkably, pre-medical marijuana oils, Cyndimae could not even express these feelings, as she was having thousands of seizures a day, and she was drugged to near comatose on legal FDA approved drugs. No one cared that my child legally took drugs used for their hypnotic date rape appeal or pre-surgery anesthesia. Not one governor had to veto a bill to keep these medications out of her hands, I didn't have to register on some list, and not one law heard in these halls restricted her use of 23 AEDs that were nearly killing her. Annually, 150,000 new cases of epilepsy are diagnosed in the United States. Of these, 30% or 45,000 patients, will be like Cyndimae Meehan and West Tarricone and fail to have seizure control with available AEDs. As it should be, before medical marijuana, their health care was between parents and their doctors, and it was none of your business. We need more options. We do not need a study.

"Unknown side effects of marijuana on the young developing brain." I ask you to realize that many of these children will not live to care, and consider the accepted side effects of the medications these kids already use. Sabril: FDA black box warning – permanent vision loss. Felbatol: FDA black box warning – fatal hepatic failure. Benzodiazepines: memory loss, early onset Alzheimer's, impaired cognition, paranoia, dizziness, increased paradoxical seizures, suicidal ideation, behavioral disorders. Drugs that are far more harmful than marijuana are already used daily to treat our children. As with any prescribed drug, patient, doctor, and parent must weigh the benefit against the risk. For many of these kids, the other side of the coin is death. I do not need another study.

Marijuana is real medicine. Cyndimae takes oils made from organically grown, pesticide free marijuana flowers and leaves -- by mouth. It is lab tested, and mom approved. The chemical components in marijuana bind to receptors found only in mammals, including humans, called endocannabinoids, also known as CB1 and CB2. These receptors are found throughout your body and are highly concentrated in the brain and nervous system and are specifically programmed to receive the cannabinoids found in marijuana. The history of using marijuana to treat the human condition is as old as is mankind. The United States Government's own Department of Health and Human Services holds a patent on the cannabinoids in marijuana, patent number 6630507, Cannabinoids as Antioxidants and Neuroprotectants. Studies abound. I do not need another study.

"But we don't know how it works." The mechanism by which aspirin works is not completely understood, but it is still recommended if you are having a heart attack. Tylenol, FDA approved AED Sabril, Lamotrigine, Ruminifide -- all of them -- mechanism of action, unknown. I look at my good friend Cara Johnson Tarricone, and her daughter West. When I look at West, I gaze into the past -- I see Cyndimae 2 years ago. Do not let that beautiful little girl die without giving her every chance at life. West needs a miracle and an option. She does not need another study.

Cyndimae and I have a resume of media links a page and a half long, and it will continue to grow as we take this fight federal. This is not a game, this is not about a political party, or any one grassroots group gaining recognition, or any law firm gaining recognition, and I am on no one's side, except the side of Cyndimae and the other patients who view it as their right to access this plant. No one has a right to restrict my daughter's freedom of movement in these United States.

Connecticut I challenge you at this crossroads. Maine is proud to claim Cyndimae -- and we will be in Augusta at the statehouse in the coming months for legislation that is directly due to our efforts with our parent's group in Maine. Should Connecticut fail to make it safe for her to come home in this legislative session, Maine will become our permanent home. As Connecticut legislators, you have a choice at this crossroad: allow this child the freedom she inalienably has the right to, and claim her as a Connecticut citizen. Or you turn us away, but do hear me -- you will see her face again as we take this battle federal. No one will restrict our pursuit of life, liberty, nor happiness by restricting our right to move freely in these United States. Please just expeditiously legislate in order to let our doctors medicate. We do not need another study.

I will be back on Friday to speak to the bill that will begin to fix the mess that is Connecticut's medical marijuana program. Please do not waste my time or endanger more children's precious lives with delay. Please consider implementing a workable program for our children during this legislative season, and do not postpone real action with a study. Thank you very much for your time and consideration. Does anyone have any questions? Susan Meehan, 860-303-5867